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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
	,	APPLICAT	ION AS FIL (Column 1)	olumn 2)		SMALL ENTITY			OTHER THAN SMALL ENTITY		
	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$) FEE (\$)			RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1 16(a), (b), or (c))		(c))			· · · · · · · · · · · · · · · · · · ·				1		1
SEARCH FEE (37 CFR 1 16(k), (i), or (m))						1			1		
EX	EXAMINATION FEE (37 CFR 1 16(o) (p) or (q))						<del></del>		1		<del> </del>
	TOTAL CLAIMS (37 CFR 1 16(i))		minus 2	20 = .			=		OR	x =	
IND	INDEPENDENT CLAIMS (37 CFR 1 16(h))		minus 3 =			×			1 ~~		
(37	CFK 1 10(n))	If the	If the specification and drawings exceed 100			▎├	<u> </u>	<del> </del>	1	X =	
API FEE	PLICATION SIZE		sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each						i i		ĺ
	CFR 1.16(s))	addi	additional 50 sheets or fraction thereof. See						1 .		ļ
-		35 L	J.S.C. 41(a)(1	)(G) and 37 CF	R 1.16(s).		<del></del>		ļ	<u> </u>	ļ
MU	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								]		
* If the difference in column 1 is less than zero, enter "0" in column 2.					7	OTAL			TOTAL		
APPLICATION AS AMENDED - PART II											•
1	(Column 2) (Column 3)					SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINII AFTER AMENDME	NG	HIGHEST NUMBER PREVIOUSLY PAID FOR _	PRESENT EXTRA	R/	ATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1 16(i))	2	Minus	" <i>22</i>	=	x	_		OR	х =	
9	Independent (37 CFR 1 16th))	. ,	Minus	3	=	х	=			x =	
ME	Application Siz	e Fee (37 CF	R 1 16(s))		<u> </u>	<u>  ~                                     </u>			OR	<u> </u>	
<b>∀</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))								OR		
						TOT	AL L FEE		OR	TOTAL ADD L FEE	
1		(Column 1	)	(Column 2)	(Column 3)						
ENT B		CLAIMS REMAININ AFTER AMENDME	1G .	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
ME	Total (37 CFR 1.16(i))	•	Minus	••	=	X	=	. == \\/	OR	x =	, EE (#)
AMENDI	Independent (37 CFR 1 16(h))	•	Minus	***	=	X	=		OR	x =	
ME	Application Siz	e Fee (37 CF	R 1 16(s))		<u> </u>				OK		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR + 16(j))								OR		
						TOT	AL 'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3" The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1											

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